	500	•	
Director's Signature:	Della Sauris		

Time Log/Program / Area: 2048-- Boston Drug Lab

Employee signatures on this time sheet certify the employee has performed the work associated with the account(s) listed.

Week Ending: May 7, 2011

Lexier Michael   Day   Court   Cot   S   15   T   15   500   T   15   15   15   15   15   15   15	Employee Name	1	Week Ending: Way 7, 2011													
Lunch: Out = in	Employee Name:		Sunday 05/01/11		Monday 05/02/11		Tuesday 05/03/11		Wednesday 05/04/11		Thursday 05/05/11		Friday 05/06/11		Saturday 05/07/11	
Control text   Cont	Lawler, Michael	Day; In – Out	65	315	715		715	830	800	505	750	735	750 >	410	725	715
Employee Signature    Comment exceptions or comments, indicate type and strout.   Comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indicate type and   Contains to the comment exceptions or comments, indi	45/69/000 h Con h	1	1215	1245	110	140	135	205	7000	230	130	135	135	2 (00	115	245
Document exceptions or comments, indicate type and amount.   Day:	Employee Signature	Outside Duty: From – To								***	•			100		
Lieshi, Hevis	Document exceptions or comments, indica amount.	ate type and	8,00	)T/	1,75	oT	5.25	OT	1.0	OT	3.75	T			10,0	07
Employee Signature	Lleshi, Hevis				7:30	3°. <i>3</i> 9	7:30	3130	7:30	3130	7:30	3:30	7:30	3:30		
Employee Signature \( \begin{align*}{cccccccccccccccccccccccccccccccccccc	81009749				1235	103	12110	12:40					<del> </del>	12.53		
Medina, Nicole  45161000  Lunch: Out- In Outside Duty: From – To  Document exceptions or comments, indicate type and amount.  Day: In – Out  Day: In – Out  Document exceptions or comments, indicate type and amount.  Day: In – Out  Lunch: Out- In Outside Duty: From – To  Day: In – Out  Lunch: Out- In Outside Duty: From – To  Day: In – Out  Lunch: Out- In Outside Duty: From – To  Double Day: In – Out  Day: In	Employee Şignature						    	12:00	,							
Medina, Nicole   In - Out   Lunch: Out - In   Outside Duty: From - To	Document exceptions or comments, indica amount.	ate type and					CMT	· 1.hc.						<u> </u>		
Outside Duty: Employee Signature  Document exceptions or comments, indicate type and amount.  Day: In – Out Lunch: Out-In  Unch: Out-In  Courset exceptions or comments, indicate type and amount.  Day: In – Out Lunch: Out-In  Out-In  Outside Duty: Employee Signature  Outside Duty: From – To  Congret exceptions or comments, indicate type and amount.  MFMM MFMM MFMM MFMM MFMM MFMM MFMM M	Medina, Nicole	Day: In – Out														
Employee Signature  From - To  Document exceptions or comments, indicate type and amount.  MFM  MFM  MFM  MFM  MFM  MFM  MFM  M	45161000				/							/				
O'Brien, Elisbeth    Day:	Employee Signature				/.									<u>.                                    </u>		
45161000   Lunch: Out - In Out - In Outside Duty: From - To   Decument processions a second procession of the second proc	Document exceptions or comments, indica amount.	ate type and			MFN	W	MIN	M	ME	M	MFN	M	MFA	M		
Employee Signature Courside Duty: From - To	O'Brien, Elisbeth				735	565	MO	240	775	505	740	140	740	240		
Employee Signature Outside Duty: From - To  Cocument exceptions or comments indicate the second seco	45161000	Out – In			120	1200	1/30	720	1130	1200	<u>-</u>	_	1130	1200		
Document exceptions or comments, indirects tune and	Employee Signature	Outside Duty: From – To						134	<u> </u>					<i>K</i>		
Document exceptions or comments, indicate type and amount.  Rev. 0.5 / Pay 1.0	Document exceptions or comments, indica amount.	ate type and									ger.	0.5	Par	1.0		

Director's Signature:									Time Log/Program / Area: 2048-Boston Drug Lab								
Employee signatures on this time sheet certify the employee has performed the work associated with the account(s) listed.								-	J - J -		2010 0031	OII DING LAD					
						(-2			Wee	k Ending:	April 30	. 2011					
Employee Name:		Sunday 0	4/24/11	Monday 04/25/11 Tuesday 04/26/11			A120144	Wednesday	·	<del>,</del>							
	Day:									Thursday	04/28/11	Friday 04/2	9/11	Saturday 04/30/11			
Lawler, Michael	In – Out			655	310	<u> </u>	630	755	55								
4 follow Stale	Lunch: Out – In			215	245	120	1,30	ાહ્ય	130			/					
Employee Signature	Outside Duty: From – To			_									_				
Document exceptions or comments, indica	ate type and					2,50	T	1:25	OT	7.5		7.5 7	A S	/ <del>0.0 \$</del>	PTIS		
Lleshi, Hevis	Day: In – Out			7:30	3:30	7:30	3/30	7:30	4:30	7:30	31.30	7:30	3:20				
81009749	Lunch: Out - in			12:00	12:30	1245	15	1230	4:30	12:00	12:30	12:00	12:30				
Employee Signature	Outside Duty: From – To									100	اکخ	8:30	10:10				
Document exceptions or comments, indica amount,	ate type and							COM	1.0 h	3,54	125	tole cett	pital pital				
Medina, Nicole	Day: In – Out																
45161000	Lunch: Out - In							/									
Employee Signature	Outside Duty: From – To																
Document exceptions or comments, indicate type and amount.				MFA	M75	MFA	Wn,5	MFA	M7,5	M FN	1/1/75	MFA	W25				
O'Brien, Elisbeth	Day: In – Out					755	242	735	565	710	240	725	225				
45161900 1 . als All Che	Lunch: Out - in					1130	1200	1130	1200	1130	1200	\	150		-		
Emproyee Signature	Outside Duty; From To								<b>1</b>		<del>  10</del> -	837					
Document exceptions or comments, indica amount.	ale type and			SIC 9	.0/						· · · · · · · · · · · · · · · · · · ·	5411 8	100F				

Director's Signature:

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Director's Signature:	ella sa	UUNIN	/			·····		Time I	Log/Progra	m / Area:	2048 Bost	ton Drug Lab			
Employee signatures on this time sheet certify the employee has performed the work associated with the account(s) listed.  Week Ending: April 23, 2011															
Employee Name:		Sunday 0	4/17/11	Monday 04/18/11 Tueso					Wednesday 04/20/11		Thursday 04/21/11		Friday 04/22/11		4/23/11
Lawler, Michael	Day: In – Out			055	4:25	730	్థ రాల	7135	7,50	700	(g \g 0	630	130		350
487912000	Lunch: Out – In			1242	110		205	1/40	190	115	145	200	230	/00	130
Employee Signature	Outside Duty: From – To														
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Lfeshi, Hevis	Day: In Out			6:45		7:30	3 <sup>80</sup>					7:30	3:30		
81009749	Lunch: Out In			12:00	12:30	12:00	12:30	13100	12:30	12:00	12:30	12:00	12:30		
Employee Signature	Outside Duty: From – To				•				,						
Document exceptions or comments, indica amount.	ate type and			HOL	725								<u></u>		
Medina, Nicole	Day; In – Out						/								
45161000 /\frac{\beta}{2}	Lunch: Out ~ In					/									
Employee Signature	Outside Duty: From – To														1 / / / / / / / / / / / / / / / / / / /
Document exceptions or comments, indica amount.	ite type and			MFM	V	MFM	1	ANFA	M	MFM	M	MFA	W		
O'Brien, Elisbeth	Day: In Out					6:30	200					120	200		

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HLN7,5 Vac 1,50

Lunch:

Out - in

Employee Signature

amount.

Document exceptions or comments, indicate type and

Outside Duty: From – To 1200

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Director's Signature:  Employee signatures on this time she	vet cordify the au		alen			****		Time	Log/Progra	am / Area:	2048- Bost	ton Drug Lab			
ampropee signatures on this time she	er cerujy ine emp	noyee nas pe	erjormea tne	work associa	sted with the	account(s) li	isted.		April 16, 2011						
Employee Name:		Sunday (	04/10/11	Monday 0	14/11/11	Tuesday 04/12/11		Wednesday	y 04/13/11	Thursday	04/14/11	Friday 04/1	5/11	Saturday 04/16/11	
Lawler Michael	Day: In – Out			7355	GK5	755	425	800	500	755	830	75	500	655	53C
4 House Jahr	Lunch: Out – In			100	130	لاكثي.	(30)	230	230	105	135	100	130	/ <i>c</i> v	130
Employee Signature	Outside Duty: From – To														
Document exceptions or comments, indica amount.	ate type and			1:35	OT V	15	στ	1.0	OT	4,5	<del>ॅर</del> ~	1.5	<u>01</u>	10.0	) ण्
Lleshi, Hevis	Day: In – Out			7:30	3:30	7:30	3:30	7:30	3130	7:30	3:30	7:30	3:30		
81009749	Lunch: Out – In			12500	12:30	12:00	12:30	12:00	12:30	12:30	1:00	laza	100		
Employee Signature	Outside Duty: From – To														
Document exceptions or comments, indica amount.	ate type and										<u> </u>				
Medina, Nicole	Day: In – Out											,		•	
45161000 /7/	Lunch: Out – In														
Employee Signature	Outside Duty: From – To														
Document exceptions or comments, indicate type and amount.				NFM	J	ME	m J	MF	-mnj	Mi	FMM	MF	MJ		
O'Brien, Elisbeth	Day: In – Out			730	1500	745	215	1155	435	740	240	730	230		
45161000	Lunch: Out-In				130	1130	1200	1	130	1130	1200	(130	100		
Employee Signature	Outside Duty: From – To			911	200								0		
Document exceptions or comments, indica amount.	ate type and			Ma	rækr	- per	-0.5/	Pe	10.5						